PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

Or 64103

CLAIMS AS			S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			1<				_	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		- I	ASIC FEE		OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS) 5 mi) 🧹 minus 20=		· 10		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			テ minus 3 =		• 4			X40=		1	X80=	- 22:
ΜL	JLTIPLE DEPE	NDENT CLAIM P	RESENT				` -			OR		320.
* If	the difference	in column 1 is	less than z	ero, enter	r "0" in ‹	"0" in column 2		+135=		OR		
		LAIMS AS A						TOTAL	<u></u>	OR	TOTAL	1030 ·
		(Column 1)	WENDEL	(Colur		(Column 3)	S	MALL	ENTITY	OR	OTHER SMALL I	
AMENDMENT A	10 10 10 10 10 10 10 10 10 10 10 10 10 1	CLAIMS REMAINING AFTER AMENDMENT	a dan ba	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEI	PENDENT	CLAIM			-135=		1	+270=	
							L	TOTAL		OR	TOTAL	
		La. e. e. 9					ADI	DIT. FEE		OR	ADDIT. FEE	
-		(Column 1)		(Colur HIGH		(Column 3)	_					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	,	(40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	DETIPLE DEF	PENDENT	CLAIM			135=		OR	+270=	
							<u> </u>	TOTAL		L	TOTAL	
		(Calumn 4)		(0-1	0\	(0.1	ADD	OIT. FEE L		OR ,	ADDIT. FEE	
	No the same	(Column 1) CLAIMS	25	(Colum		(Column 3)						
ENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA	B	ATE -	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		= '	x	40=		ı	X80=	
`	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM.					OR	7,002	
• 1	f the entry in colu	nn 1 is less than th	e entry in colu	mn 2 write	"O" in oct	umn 3		135=		OR	+270=	
**	f the "Highest Nur	mber Previously Pa	id For" IN THIS	S SPACE is	less than	n 20, enter "20."		TOTAL IT. FEE		OR ,	TOTAL DDIT. FEE	
7	The "Highest Num	mber Previously Pa ber Previously Paid	d For" (Total or	o SPACE IS Independe	nt) is the	n 3, enter "3." highest number		_	opriate box			